2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: _

Jul 19, 2004 8:00 am Secretary of State DOCUMENT # P01000018448 07-19-2004 90003 027 ***150.00 1. Entity Name LOB INC. Principal Place of Business Mailing Address 54063074 1700 SE 15TH STREET. 1700 SE 15TH STREET FORT LAUDERDALE, FL 33316 FORT LAUDERDALE, FL 33316 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07132004 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 65-1079946 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required ... 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name FLEISHER, DAVID A Street Address (P.O. Box Number is Nat Acceptable) # 83 661 S.E. 14TH COURT, #2 FORT LAUDERDALE, FL 33316 Zip Code 33316 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. 23.5 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be Due by September 8, 2004 Trust Fund Contribution. Added to Fees 10.1/ OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Defete TITLE Change Addition SEXTON, DAVID W III MAME NAME 1313 Mandarin Isle STREET ADDRESS 701 S.W. 8TH WAY. STREET ADDRESS FORT LAUDERDALE, FL 33315 City-St-7iP 33315 TITLE ☐ Delete TITLE ☐ Change Addition HARAF FLEISHER, DAVID A NAME STREET ADDRESS 1700 SE 15TH STREET #103 STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE, FL 33316 City_St_7IP HILE- -→ □ Delete TITLE Change Addition: NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-719 TITLE ☐ Defete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address

FILED

9544467786

24063074

Attachmats

July 14, 2004

Division of Corporations P.O Box 1500 Tallahassee, FL 32302

RE: Annual Report for LOB, Inc. Document # P01000018448

To whom it may concern:

Please note that for the last two years I have not received my Annual Report in the mail for some reason or another. I recently received a "Notice of Intent to Dissolve" post card from the Florida Department of State noting the intent to dissolve LOB, Inc.

Please do not dissolve LOB, Inc. and accept this payment of \$150, the original payment due, as confirmation of my intention to keep the company in existence. This payment is being sent late only because I did not receive the annual report in the mail prior to the filing due date and I ask that you waive any further penalties.

If you have any questions, please feel free to call me at 954-446-7786.

Sincerely,

David Fleisher Vice President